

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2001

Application or Docket Number

86052-6

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS	46	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	46 minus 20 = *	26
INDEPENDENT CLAIMS	3 minus 3 = *	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	234
X42=	
+140=	
TOTAL	604

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	

**CLAIMS AS AMENDED - PART II**

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 46	Minus ** 46	=
Independent	* 3	Minus *** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

OR  
OTHER THAN  
SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	
ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	
ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	
ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	
ADDIT. FEE	


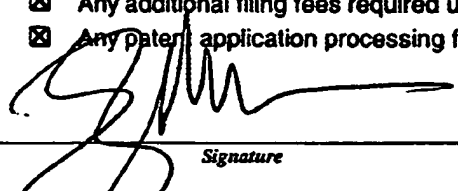
\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."


The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Best Available Copy

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				Docket No. 86052-6	
Applicant(s): Mario D'AMICO et al.					
Application No. 10/024,266	Filing Date December 21, 2001	Examiner Zeender F. Ryan	Customer No. 28291	Group Art Unit 3627	Confirmation No. 4982
Invention: <b>SYSTEM AND METHOD TO FACILITATE THE PROCUREMENT OF INFORMATION FROM A USER</b>					
<b>COMMISSIONER FOR PATENTS:</b> Transmitted herewith is an amendment in the above-identified application. <div style="display: flex; justify-content: space-between; align-items: center;"> <div> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27         </div> <div style="text-align: center;"> <b>RECEIVED</b>  AUG 25 2004 </div> <div style="text-align: right;">  </div> </div>					
The fee has been calculated and is transmitted as shown below. <div style="float: right; font-weight: bold; font-size: 1.2em;">GROUP 3600</div>					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	46	46	0	x \$9.00	\$0.00
INDEP. CLAIMS	3	3	0	x \$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="margin-top: 10px;"> <input checked="" type="checkbox"/> No additional fee is required for amendment.  <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____  <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.  <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2550 </div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.  <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div> <div style="margin-top: 20px;">   _____  Signature </div> <div style="margin-top: 10px; text-align: right;"> Dated: August 17, 2004 </div>					
Sanro Zlobec, Reg. No. 52,535 <b>SMART &amp; BIGGAR</b> 1000 de la Gauchetière Street West Suite 3300 Montreal, Quebec, H3B 4W5 CANADA			I certify that this document and fee is being deposited on with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  <div style="border: 1px solid black; height: 40px; margin: 5px 0;"></div> <div style="border: 1px solid black; height: 40px; margin: 5px 0;"></div> <div style="border: 1px solid black; height: 40px; margin: 5px 0;"></div>		
cc:			<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> Signature of Person Mailing Correspondence </div> <div style="border: 1px solid black; padding: 5px;"> Typed or Printed Name of Person Mailing Correspondence </div>		

3627

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<b>Associate Power Of Attorney Or Agent (37 CFR 1.34)</b> <b>(For Representation Related To A Patent Application)</b>			Docket No. 86052-6
In Re Application Of: <b>Mario D. AMICO et al.</b>			
Serial No. 10/024,266	Filing Date December 21, 2001	Examiner Zeender, F. Ryan	Group Art Unit 3627
Invention: <b>SYSTEM AND METHOD TO FACILITATE THE PROCUREMENT OF INFORMATION FROM A USER</b>			
<p style="text-align: center;"><u>TO THE COMMISSIONER FOR PATENTS:</u></p> <p>Please recognize the following as    <input type="checkbox"/> Associate Attorney    <input checked="" type="checkbox"/> Associate Agent    in this application.</p> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 20px;"> <div style="width: 60%;"> <p>Name: <b>Sanro Zlobec</b></p> <p>Reg. No.: <b>52,535</b></p> <p>Address: <b>SMART &amp; BIGGAR</b>            1000 de la Gauchetière Street West            Suite 3300            Montreal, Quebec H3B 4W5            CANADA</p> <p>Tel. No. <b>(514) 954-1500</b></p> </div> <div style="width: 35%; text-align: center; border: 1px solid black; padding: 10px; margin-top: 20px;"> <p><b>RECEIVED</b></p> <p>AUG 25 2004</p> <p><b>GROUP 3600</b></p> </div> </div> <div style="margin-top: 40px;"> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;">  <p style="text-align: center; font-size: small;">Signature of Principal Attorney or Agent of Record</p> </div> <div style="width: 55%;"> <p>Dated: <b>August 17, 2004</b></p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; border: 1px solid black; padding: 5px;"> <p><b>Stephan P. Georgiev, Reg. No. 37,563</b>  <b>SMART &amp; BIGGAR</b>            1000 de la Gauchetière Street West            Suite 3400            Montreal, Quebec            H3B 4W5            CANADA</p> <p style="font-size: x-small; margin-top: 5px;">Registration Number &amp; Address of Principal Attorney or Agent of Record</p> </div> <div style="width: 50%; border: 1px solid black; padding: 5px;"> <p style="font-size: x-small;">I certify that this document is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <p style="font-size: x-small; text-align: center;">Signature of Person Mailing Correspondence</p> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <p style="font-size: x-small; text-align: center;">Typed or Printed Name of Person Mailing Correspondence</p> </div> </div> </div>			